

Name of Candidate or Committee

John Hines

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Reporting period

through

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		7/1/10	\$ 500.00
Mailing Address		1/1/10	\$
City, State, Zip Code		1/1/10	\$
Name of Employer (Required)		1/1/10	\$
Occupation (Required)		Aggregate year-to-date	\$ 500.00
B. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		10/30/10	\$ 250.00
Mailing Address		1/1/10	\$
City, State, Zip Code		1/1/10	\$
Name of Employer (Required)		1/1/10	\$
Occupation (Required)		Aggregate year-to-date	\$ 250.00
C. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		10/5/10	\$ 1000.00
Mailing Address		1/1/10	\$
City, State, Zip Code		1/1/10	\$
Name of Employer (Required)		1/1/10	\$
Occupation (Required)		Aggregate year-to-date	\$ 1000.00
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		1/1/10	\$ 1000.00
Mailing Address		1/1/10	\$
City, State, Zip Code		1/1/10	\$
Name of Employer (Required)		1/1/10	\$
Occupation (Required)		Aggregate year-to-date	\$ 1000.00

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ITEMIZED DISBURSEMENTS

A. Full name	<u>Altria Client Services</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>P.O. Box 24087</u>	<u>10/1/10</u>	\$
City, State, Zip Code	<u>Jackson MS. 39225</u>	<u>10/1/10</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>300.00</u>
B. Full name	<u>Merck & Co. Inc</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>2479 Merfreesboro Rd</u>	<u>11/15/10</u>	\$
City, State, Zip Code	<u>Nashville, TN. 37217</u>	<u>11/15/10</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>250.00</u>
C. Full name	<u>Check-N-Cash</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>11/20/10</u>	\$
City, State, Zip Code	<u>Jackson MS 39212</u>	<u>11/20/10</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>250.00</u>
D. Full name	<u>Mill Creek</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>12/5/10</u>	\$
City, State, Zip Code	<u>Jackson MS 39212</u>	<u>12/5/10</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>250.00</u>
E. Full name	<u>ATmos Energy PAC</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>12/5/10</u>	\$
City, State, Zip Code	<u>Jackson, MS 39212</u>	<u>12/5/10</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>500.00</u>
F. Full name	<u>Chris McNeal</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>12/5/10</u>	\$
City, State, Zip Code	<u>Jackson, MS</u>	<u>12/5/10</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>500.00</u>

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ITEMIZED DISBURSEMENTS

A. Full name	U.S. Postal	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		5/20/10	\$ 750.00
City, State, Zip Code	Greenville, MS 38701	12/01/10	\$ 750.00
Purpose of Disbursement (Optional)	Postage	Aggregate Year-to-date	\$ 15,000.00
B. Full name	W BAB	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		8/15/10	\$ 350.00
City, State, Zip Code	Greenville, MS 38703	12/01/10	\$ 250.00
Purpose of Disbursement (Optional)	Raido ADDS	Aggregate Year-to-date	\$ 600.00
C. Full name	Tanniy Anderson	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		10/01/10	\$ 1000.00
City, State, Zip Code	Jackson, MS 39212	—/—/—	\$
Purpose of Disbursement (Optional)	CONSULTANT	Aggregate Year-to-date	\$ 1000.00
D. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		—/—/—	\$
City, State, Zip Code		—/—/—	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
E. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		—/—/—	\$
City, State, Zip Code		—/—/—	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
F. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		—/—/—	\$
City, State, Zip Code		—/—/—	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$

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